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DECLARATION — Utility or Design Patent Application

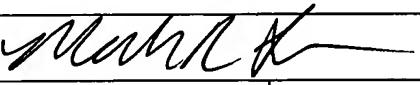
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number		23500		OR <input type="checkbox"/> Correspondence address below	
Name Exelixis, Inc.					
Address 170 Harbor Way					
City South San Francisco		State CA		ZIP 94083-0511	
Country US		Telephone 650-837-7000		Fax 650-837-8234	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Michael R.			Family Name or Surname Costa		
Inventor's Signature <i>Mr R Costa</i>			Date 7/18/05		
Residence: City SAN FRANCISCO		State CA	Country US	Citizenship US	
Mailing Address 18 HAZELWOOD AVENUE					
City SAN FRANCISCO		State CA	Zip 94112	Country US	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Mark E.			Family Name or Surname Maxwell		
Inventor's Signature			Date		
Residence: City SAN FRANCISCO		State CA	Country US	Citizenship US	
Mailing Address 524 30TH AVENUE, #105					
City SAN FRANCISCO		State CA	Zip 94121	Country US	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 2 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

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Inventor's Signature				Date	
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Mailing Address 18 HAZELWOOD AVENUE					
City SAN FRANCISCO		State CA	Zip 94112	Country US	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Mark E.			Family Name or Surname Maxwell		
Inventor's Signature <i>M. E. Maxwell</i>				Date 7/28/2005	
Residence: City LANSDALE SAN FRANCISCO mm		State PA CA mm	Country US	Citizenship US	
Mailing Address 524 30TH AVENUE, #405 ^{mm} 1160 S. VALLEY FORGE RD.					
City LANSDALE SAN FRANCISCO mm		State PA CA mm	Zip 19446 94121 mm	Country US	
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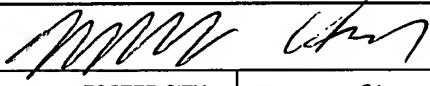
DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Mark R.		Lackner	
Inventor's Signature 		Date 8/10/05	
Residence: City BRISBANE	State CA	Country US	Citizenship US
Mailing Address 143 MENDOCINO STREET			
Mailing Address			
City BRISBANE	State CA	ZIP 94005	Country US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Tak		Hung	
Inventor's Signature		Date	
Residence: City FOSTER CITY	State CA	Country US	Citizenship CN
Mailing Address 1072 GULL AVENUE			
Mailing Address			
City FOSTER CITY	State CA	Zip 94404	Country US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Carol L.		OBrien	
Inventor's Signature		Date	
Residence: City PACIFICA	State CA	Country US	Citizenship US
Mailing Address 461 NORFOLK DRIVE			
Mailing Address			
City PACIFICA	State CA	Zip 94044	Country US

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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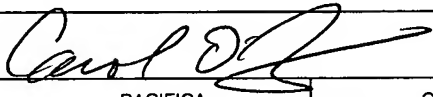
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Given Name (first and middle (if any))			Family Name or Surname		
Mark R.			Lackner		
Inventor's Signature				Date	
Residence: City	BRISBANE	State	CA	Country	US
Mailing Address 143 MENDOCINO STREET					
Mailing Address					
City	BRISBANE	State	CA	ZIP	94005
Country				US	
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Tak			Hung		
Inventor's Signature 				Date July 16th 2005	
Residence: City	FOSTER CITY	State	CA	Country	US
Mailing Address 1072 GULL AVENUE					
Mailing Address					
City	FOSTER CITY	State	CA	Zip	94404
Country				US	
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Carol L.			OBrien		
Inventor's Signature				Date	
Residence: City	PACIFICA	State	CA	Country	US
Mailing Address 461 NORFOLK DRIVE					
Mailing Address					
City	PACIFICA	State	CA	Zip	94044
Country				US	

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Inventor's Signature		Date	
Residence: City	BRISBANE	State	CA
Country	US	Citizenship	US
Mailing Address 143 MENDOCINO STREET			
Mailing Address			
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Tak		Hung	
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Country	US	Citizenship	CN
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Mailing Address			
City	FOSTER CITY	State	CA
Zip	94404	Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Carol L.		OBrien	
Inventor's Signature 		Date 8/25/05	
Residence: City	PACIFICA	State	CA
Country	US	Citizenship	US
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Mailing Address			
City	PACIFICA	State	CA
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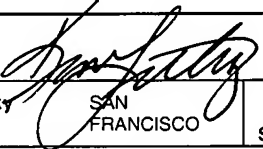
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Timothy S.		Heuer	
Inventor's Signature <i>Timothy S Heuer</i>		Date <i>07-15-2005</i>	
Residence: City	EL GRANADA	State	CA
		Country	US
Mailing Address 315 AVENUE DEL ORO			
Mailing Address			
City	EL GRANADA	State	CA
		ZIP	94018
		Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Kim		Lickteig	
Inventor's Signature		Date	
Residence: City	SAN FRANCISCO	State	CA
		Country	US
Mailing Address 144 MISSOURI STREET			
Mailing Address			
City	SAN FRANCISCO	State	CA
		Zip	94107
		Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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